

HAWAII STATE ETHICS COMMISSION

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LOBBYIST REGISTRATION FORM

STATE OF HAWAII

	(Type o	r Print Clearly)	STATE ETHICS COMMISSION
PART I LOBBYIST			
NAME (Last)	(First)	(Middle)	TELEPHONE
Urquhart	Robert	Н	808-548-4811
MAILING ADDRESS (Street)		- · · · · · · · · · · · · · · · · · · ·	FAX 808-548-2975
680 Iwilei Road, Box 510			EMAIL
(City)	(State)		(Zip Code)
Honolulu	HI		96817
EMPLOYING ORGANIZATION (Fill in only	o lobby) TELEPHONE		
Castle & Cooke Properties,	808-548-4811		
MAILING ADDRESS (Street)			FAX 808-548-2975
680 Iwilei Road, Box 510	EMAIL		
(City)	 (State)		(Zip Code)
Honolulu	HI		96817
Honolulu	HI		96817

PART II ORGANIZATION		
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)		TELEPHONE 808-548-4811 FAX 808-548-2975 EMAIL
Castle & Cooke Propertie		
MAILING ADDRESS (Street) 680 Iwilei Road, Box 510		
Honolulu	HI	96817
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT		TELEPHONE
Harry A Saunders		808-548-4811
MAILING ADDRESS (Street)		FAX 808-548-2975
680 Iwilei Road, Box 510		EMAIL
(City)	(State)	(Zip Code)
Honolulu	н	96817

PART III DESCRIPTIO	N OF SUBJECTS UPON WH	ICH YOU EXPECT TO LOBE	SY		
Agriculture	Education	Human Services	Science, Technology & Economic Development		
Communications & Public Utilities	Government Operation & Finance	Intergovernmental Relations, International Affairs	☐ Tourism & Recreation		
Consumer Protection & Commerce	Hawaiian Affairs	C Labor & Employment	☐ Transportation		
Culture, Arts, Historic Preservation	Health	Planning, Land & WaterUse Management	Other: (indicate below)		
Ecology, EnergyEnvironmental Protection	Housing	Public Safety & Corrections			
PART IV CERTIFICATION	ON OF LOBBYIST				
I hereby certify that ti	ne information furnished abov	e is, to the best of my knowle	dge, correct and complete.		
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· /	(Signature of Lobbyist) (Date)				
-			****		
PART V AUTHORIZAT	ION TO LOBBY				
NAME	TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED				
Harry A. Saunders	President				
NAME OF ORGANIZATION (if applicable)			TELEPHONE		
Castle & Cooke Properties, Inc.			808-548-4811		
MAILING ADDRESS (Street)			FAX 808-548-2975		
L , w , , , ⊢			EMAIL		
(City)	(State)		(Zip Code)		
Honolulu	HI		96817		
I hereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.					
	, , , , , , , , , , , , , , , , , , ,	<u> </u>	JAN - 8 2013		
			WAN # 8 2015		

(Signature of Authorizing Officer or Person Represented)

(Date)